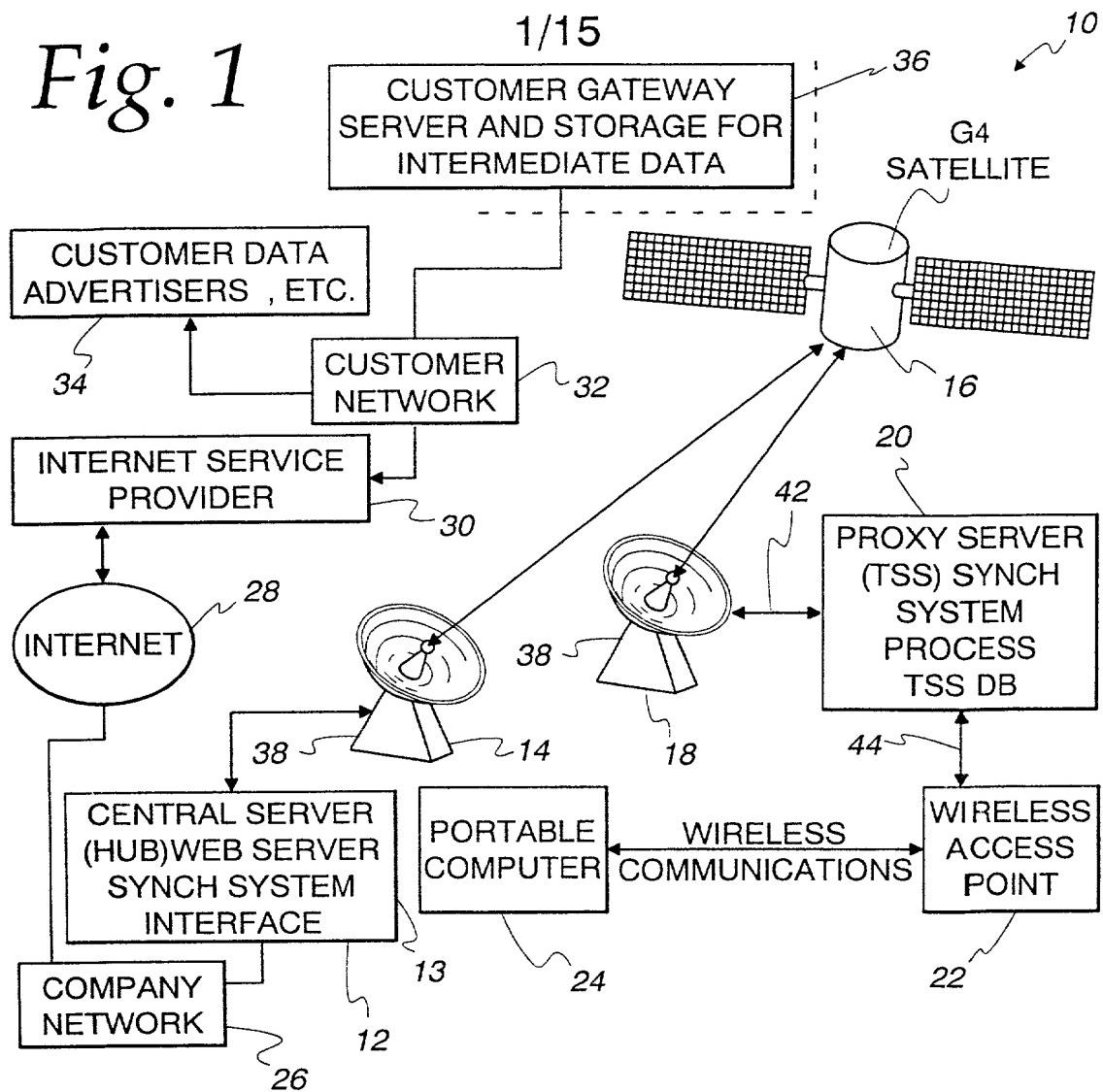
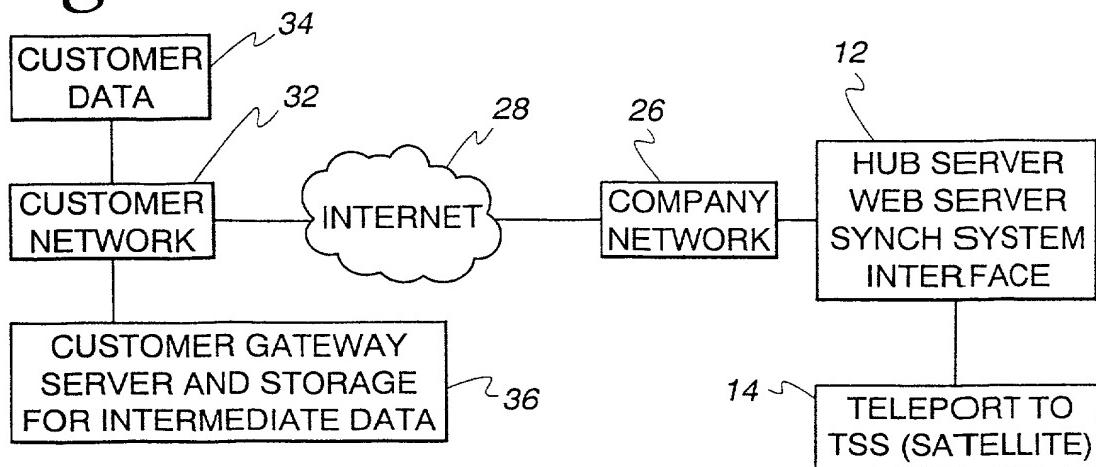


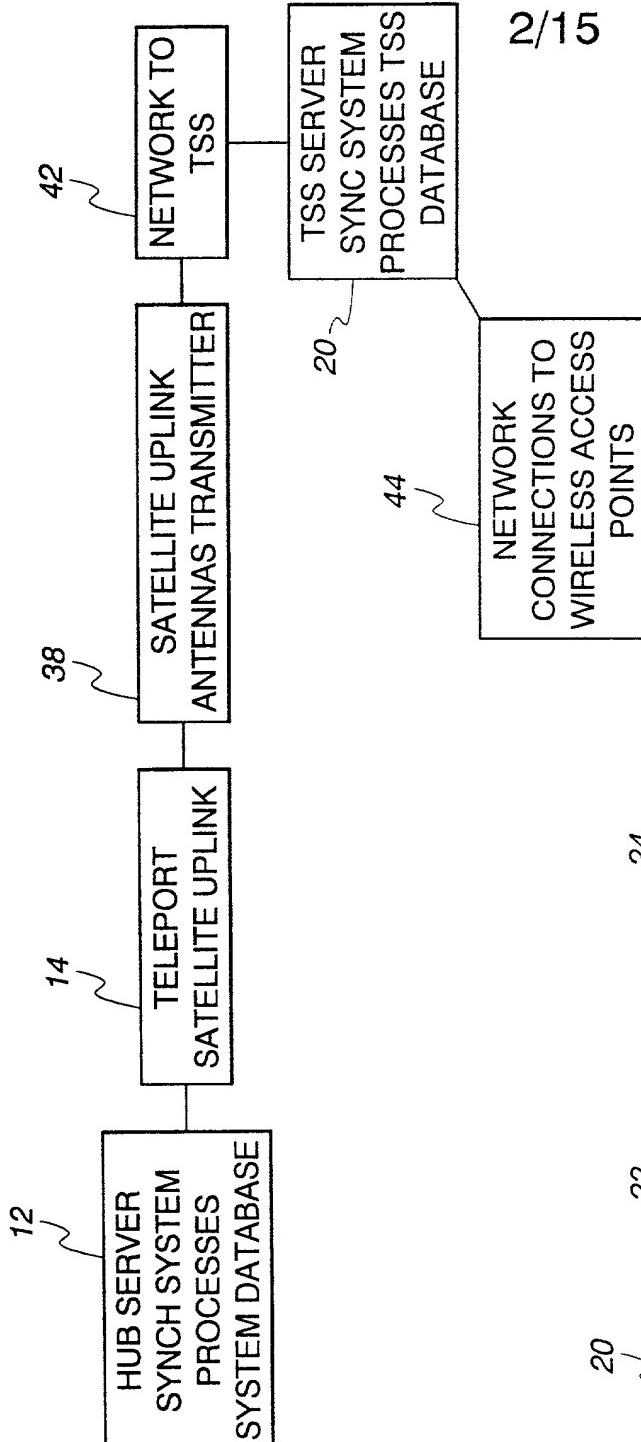
*Fig. 1*



*Fig. 2*

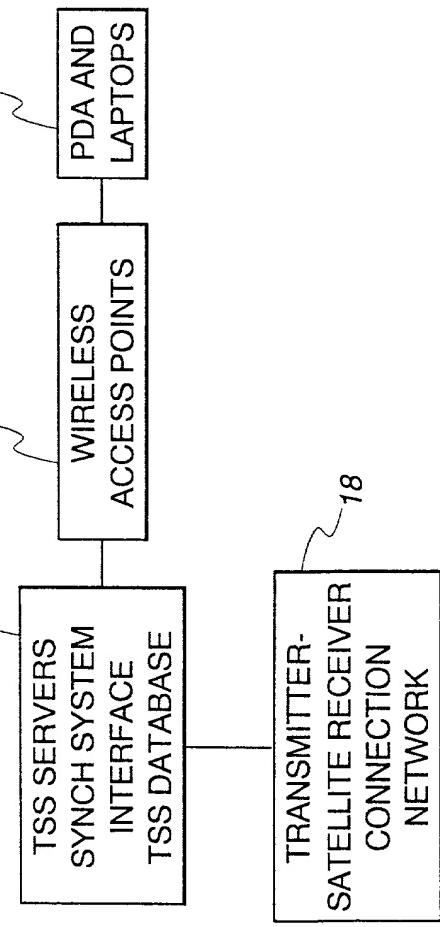


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Fig. 4



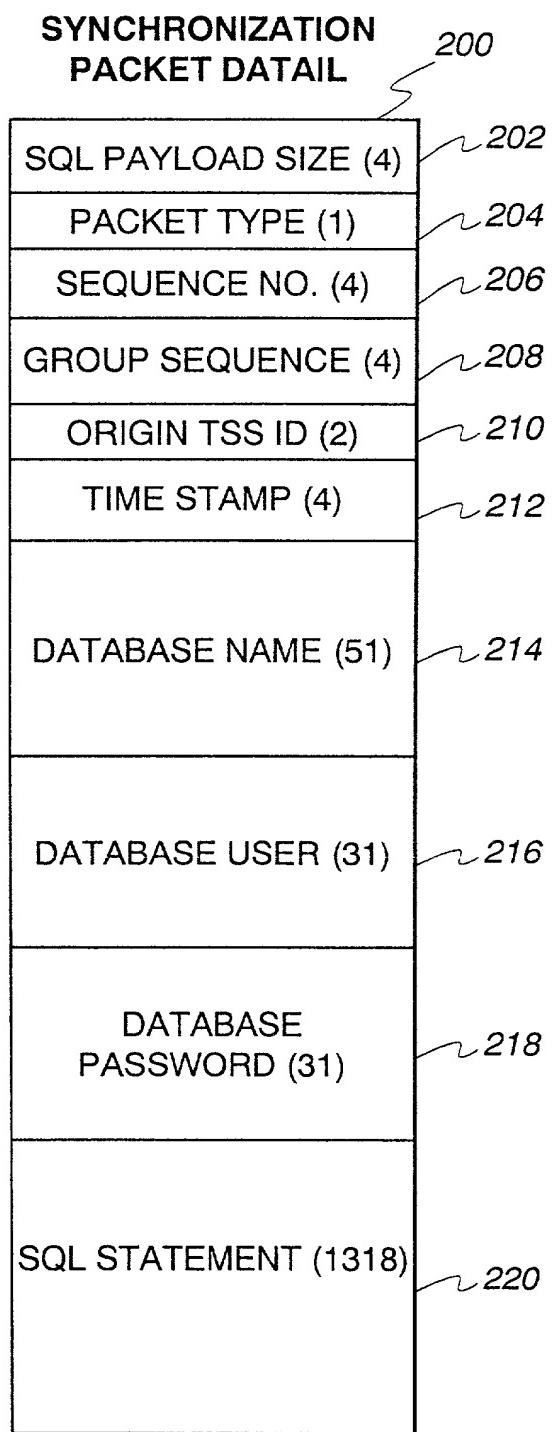
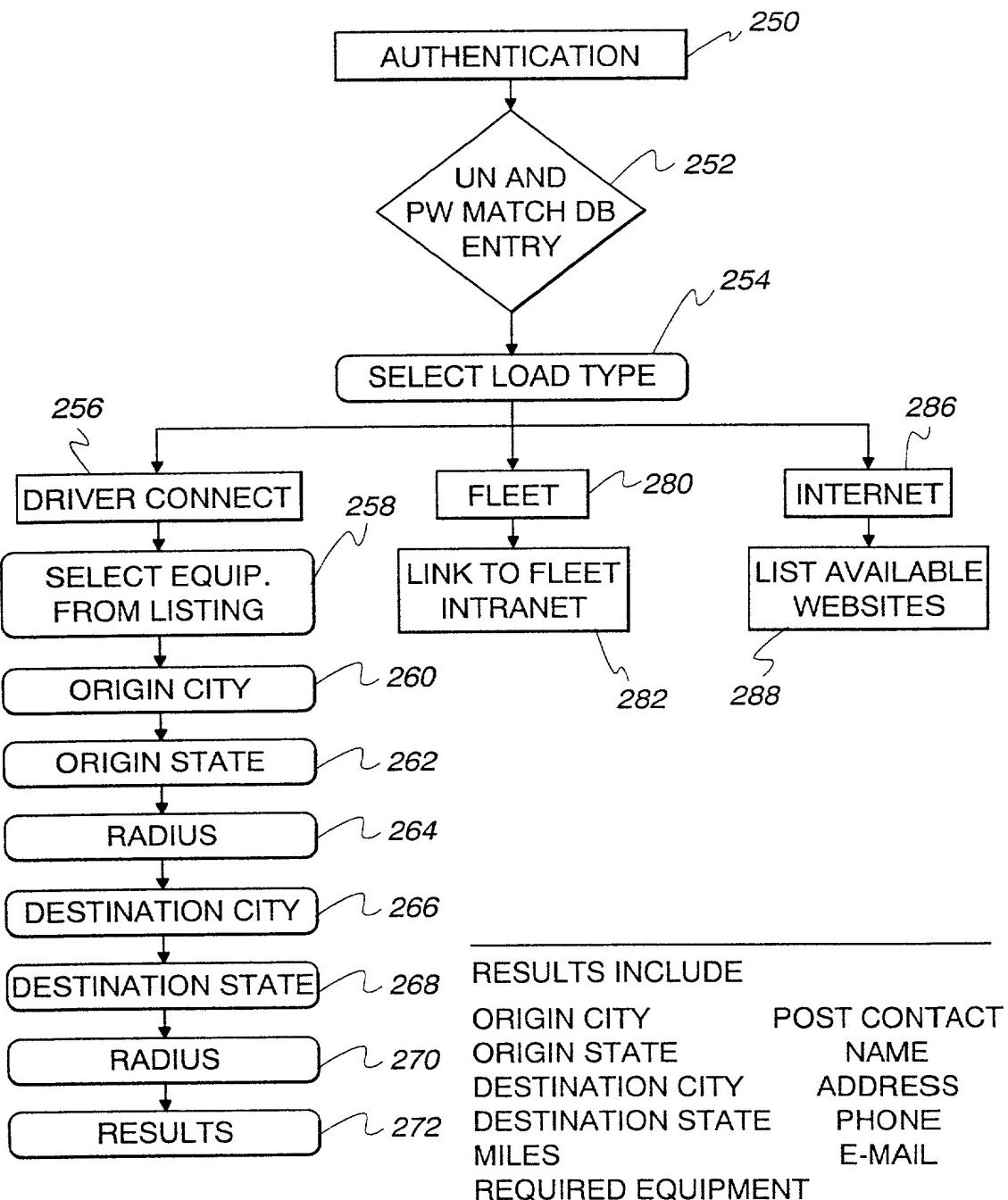
*Fig. 5*

Fig. 6

## ELECTRONIC LOADS



*Fig. 7A*

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EQUIPMENT TYPES

DESCRIPTION	EQUIPMENT TYPE	SEARCH CLASS
<b>CONTAINER</b>		
CONTAINER, INSULATED	CI	C
CONTAINER, REFRIGERATED	CR	C
CONTAINER, REGULAR	C	C
<b>DECKS, STANDARD</b>		
DROP DECK OR STEP DECK	SD	D
DOUBLE DROP	DD	D
FLATBED	FD	D
<b>DECKS, SPECIALIZED</b>		
DOUBLE DROP	DD	X
DROP DECK, LAND ALL	LA	X
DUMP TRAILER	DT	X
FLATBED, B-TRAIN	BT	X
FLATBED, HOTSHOT	FH	X
FLATBED, MAXI	MX	X
LOWBOY	LB	X
REMOVABLE GOOSENECK	RG	X
STRETCH TRAILER	ST	X
TRUCK AND TRAILER	TT	X
<b>DRY BULK</b>		
HOPPER BOTTOM	HB	B
PNEUMATIC	PN	B
<b>FLATBEDS</b>		
FLATBED	F	F
FLATBED, AIR RIDE	FA	F
FLATBED, B-TRAIN	BT	F
FLATBED, DOUBLE	F2	F
FLATBED, DRIVER TEAM	FM	F
FLATBED, MAXI	MX	F
FLATBED, STEP DECK	FD	F
FLATBED, VAN	FV	F
FLATBED, VAN W/REEFER	FR	F
FLATBED, W/SIDES	FS	F
FLATBED W/TARPS	FT	F
TRUCK AND TRAILER	TT	F
VAN OR FLATBED	VF	F
VAN OR FLATBED W/TARPS	VT	F

*Fig. 7AB*

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HAZARDOUS MATERIAL		
FLATBED, HAZMAT	FZ	Z
REEFER, HAZMAT	RZ	Z
VAN, HAZMAT	VZ	Z
OTHER EQUIPMENT		
AUTO CARRIRER	AC	O

*Fig. 7AA*

*Fig. 7AB*

*Fig. 7BA*

REEFERS			
FLAT/VAN/REEFER	FR		R
REEFER	R		R
REEFER, AIR RIDE	RA		R
REEFER, DOUBLE	R2		R
REEFER, DRIVER TEAM	RM		R
REEFER OR VAN	RV		R
VAN OR REEFER	VR		R
TANKERS			
TANKERS, ALUMINUM	TA		T
TANKER, STEEL	TS		T
VANS, STANDARD			
FLATBED OR VAN	FV		V
FLATBED/VAN/REEFER	FR		V
REEFER OR VAN	RV		V
VAN	V		V
VAN, AIR RIDE	VA		V
VAN, DOUBLE	V2		V
VAN, DRIVER TEAM	VM		V
VAN, INSULATED	VI		V
VAN, LIFTGATE	VG		V
VAN, TRIPLE	V3		V
VAN, VENTED	VV		V

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VAN OR FLATBED	VF	V
VAN OR FLATBED W/TARP	VT	V
VAN OR REEFER	VR	V
VAN W/CURTAINS	VC	V
<b>VANS, SPECIALIZED</b>		
MOVING VAN	MV	S
VAN, DOUBLE	V2	S
VAN, DRIVER TEAM	VM	S
VAN, TRIPLE	V3	S
VAN, HOTSHOT	VH	S
VAN, INSULATED	VI	S
VAN, OPEN TOP	OT	S
VAN, ROLLER BALL	VB	S
VAN, VENTED	VV	S
VAN W/CURTAINS	VC	S

*Fig. 7BB*

*Fig. 7BA*

*Fig. 7BB*

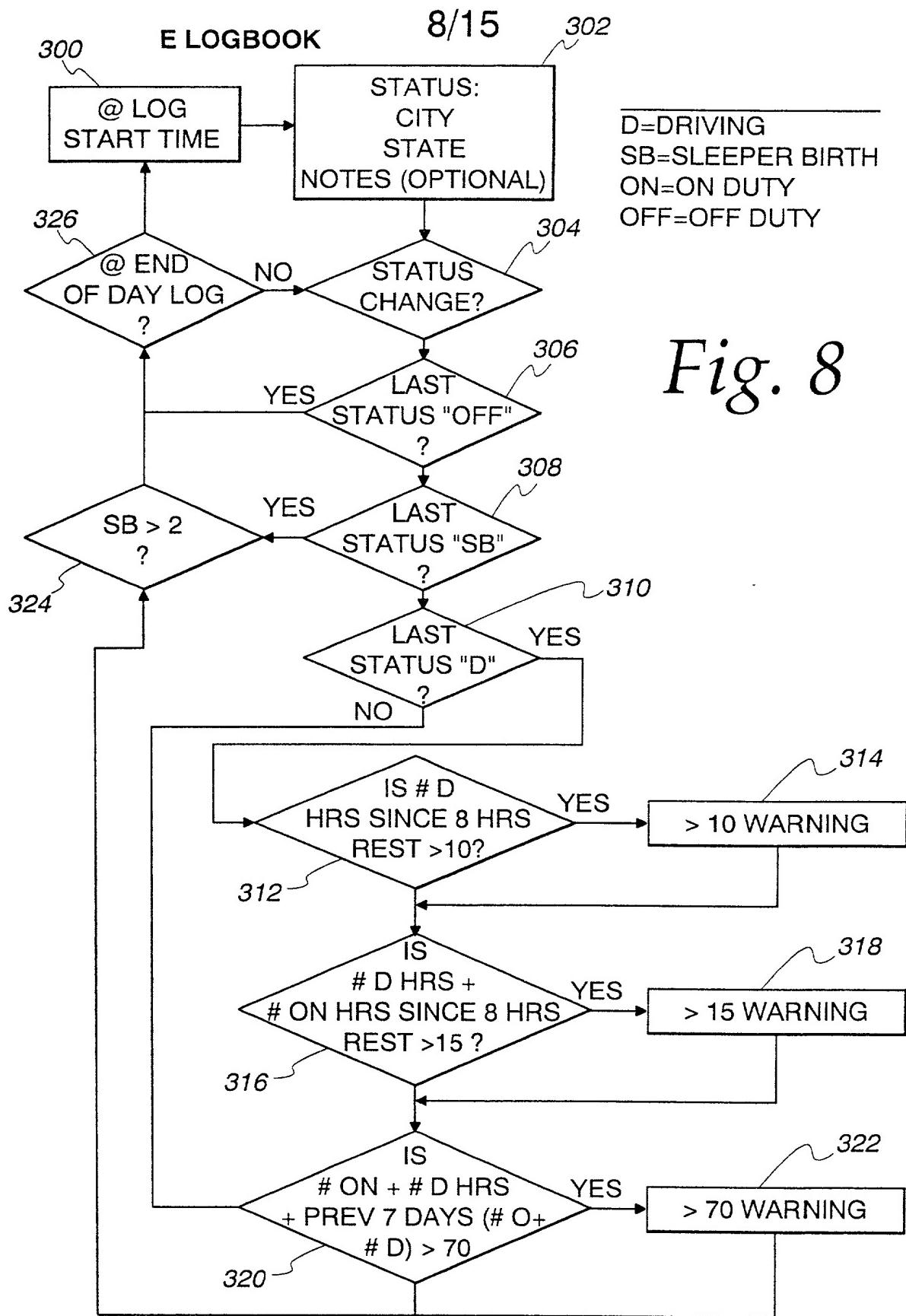


Fig. 8

703290 66636360

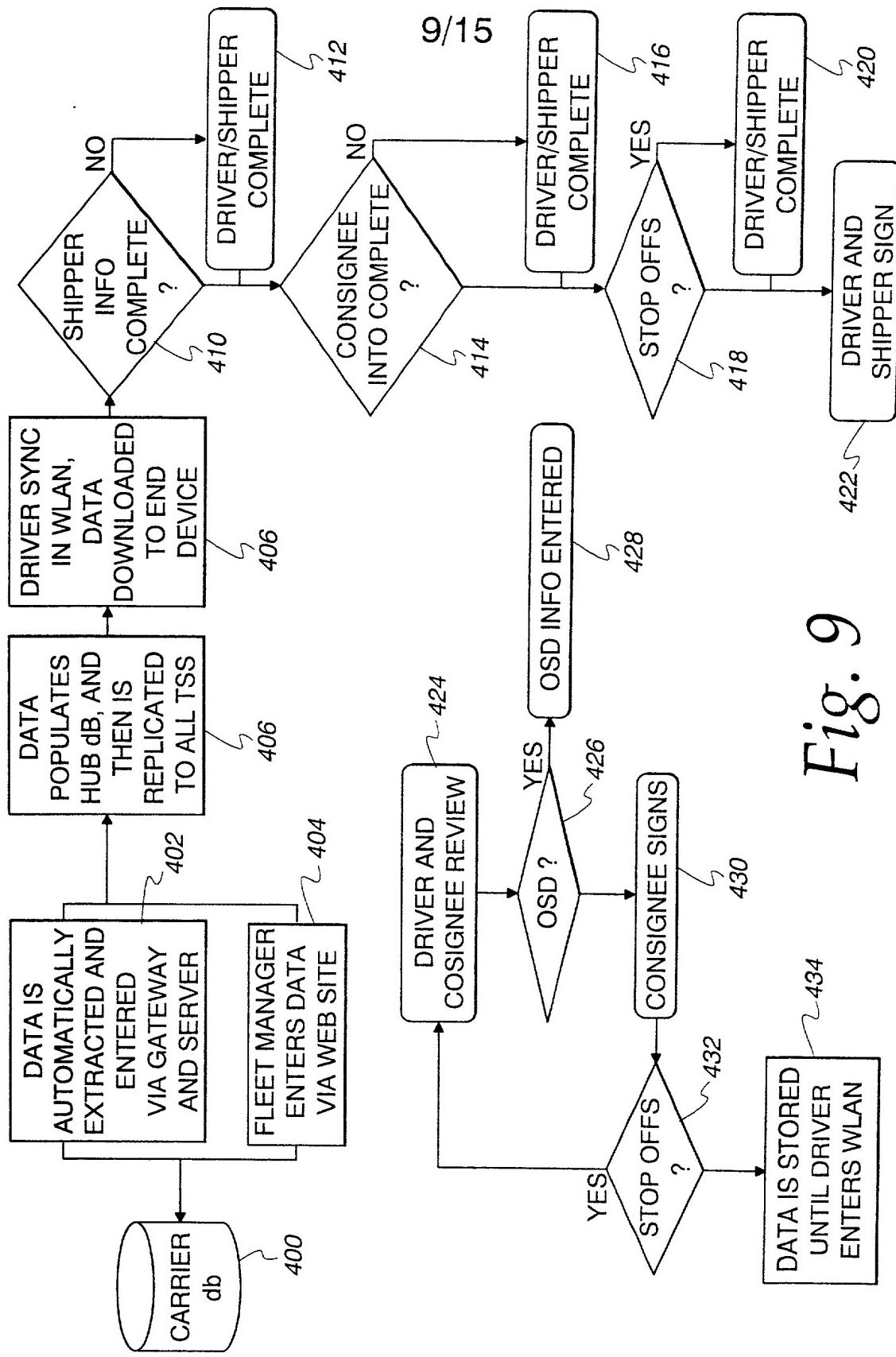


Fig. 9

*Fig. 10*

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HUB INCOMING DATA MANAGEMENT

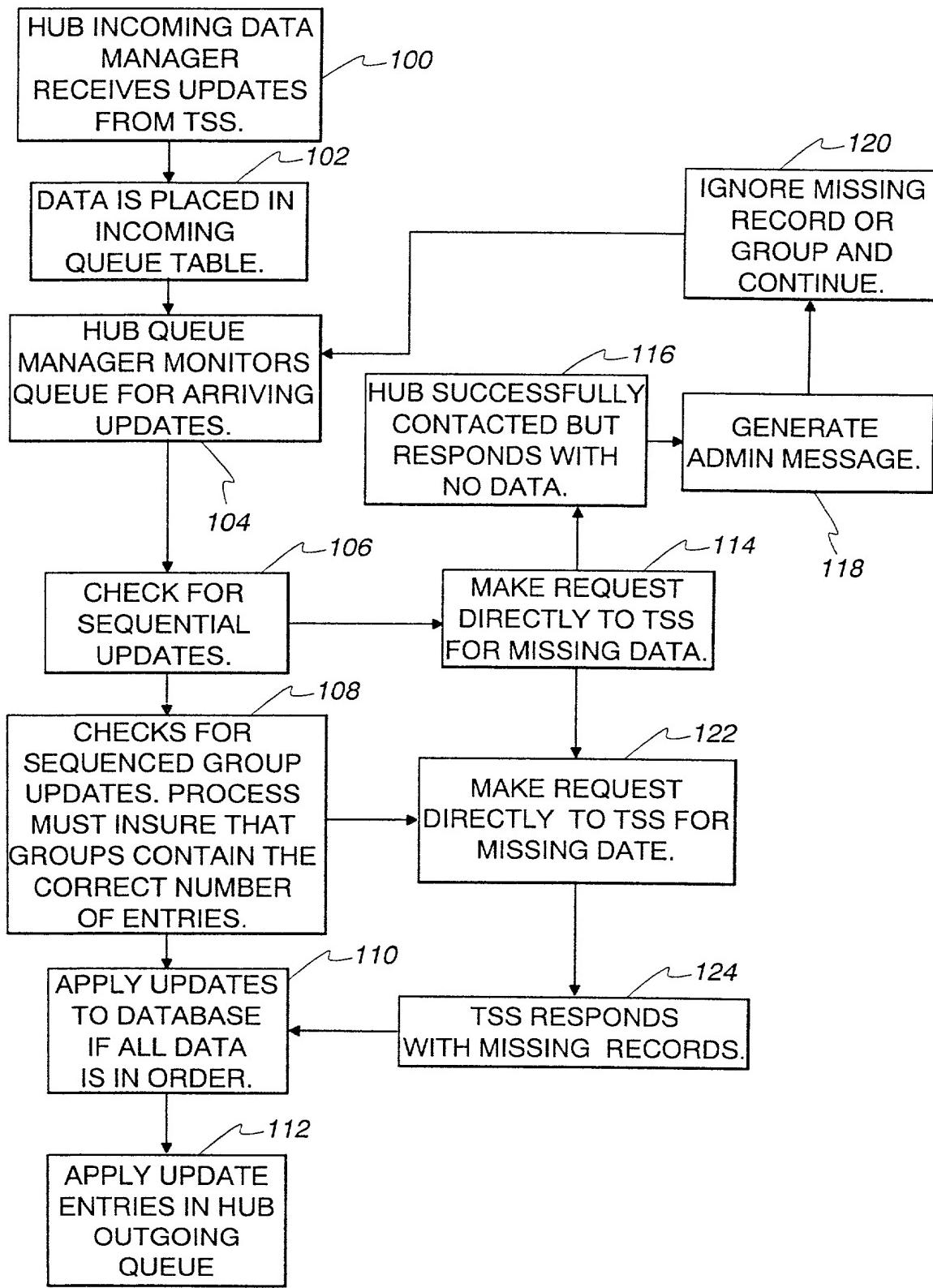
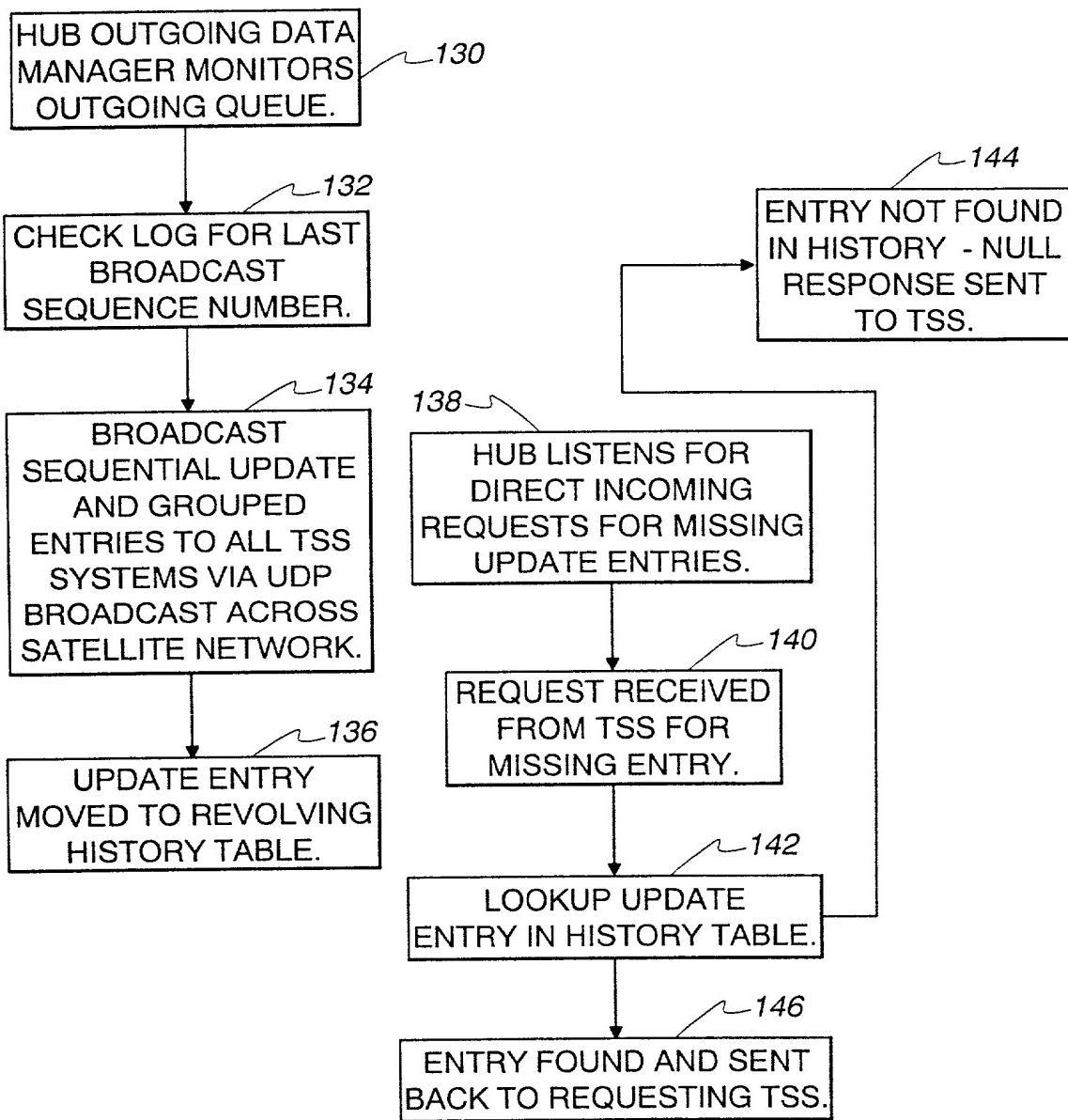


Fig. 11

## HUB OUTGOING DATA MANAGEMENT



*Fig. 12*

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TSS INCOMING DATA MANAGEMENT

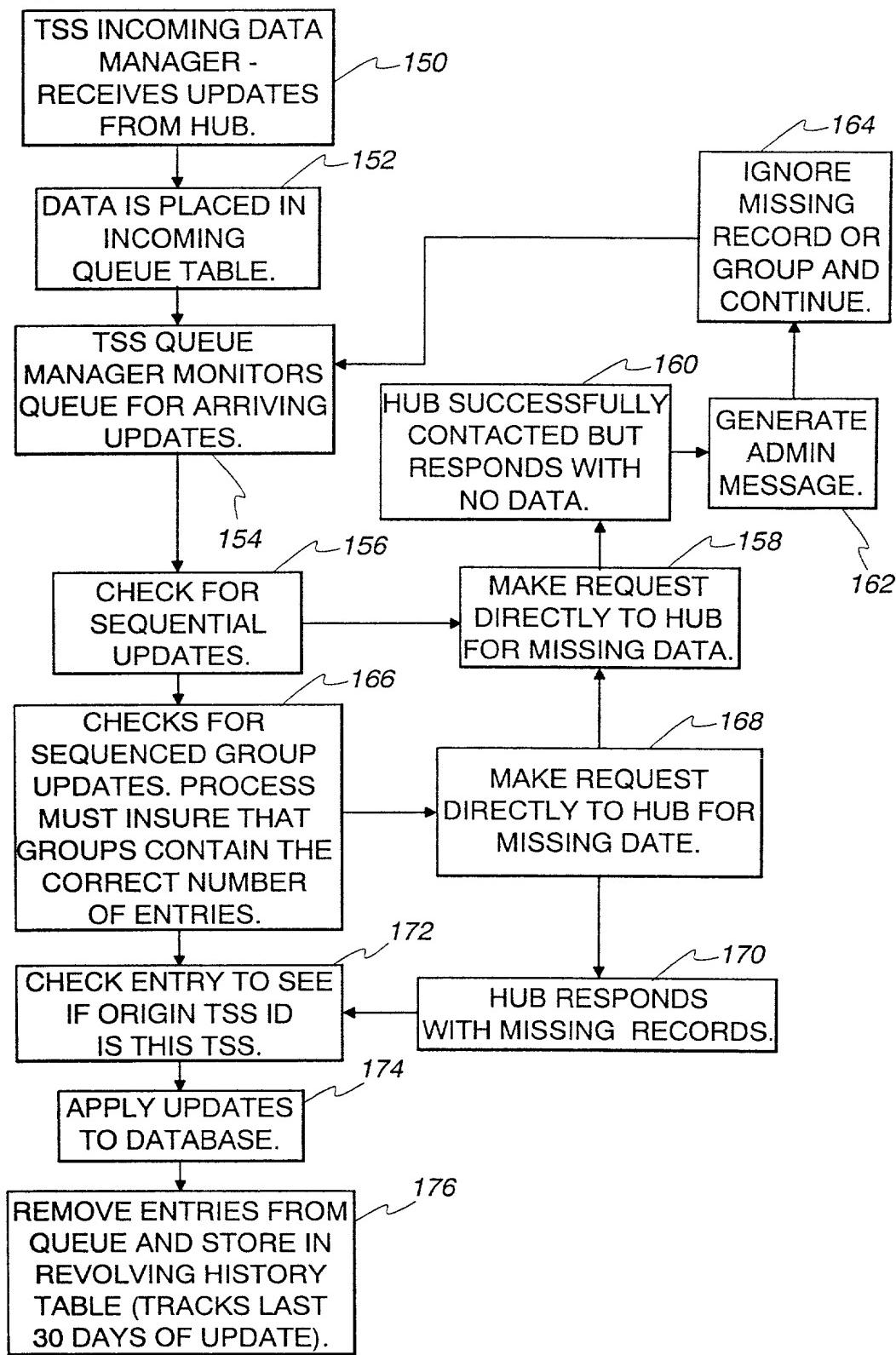
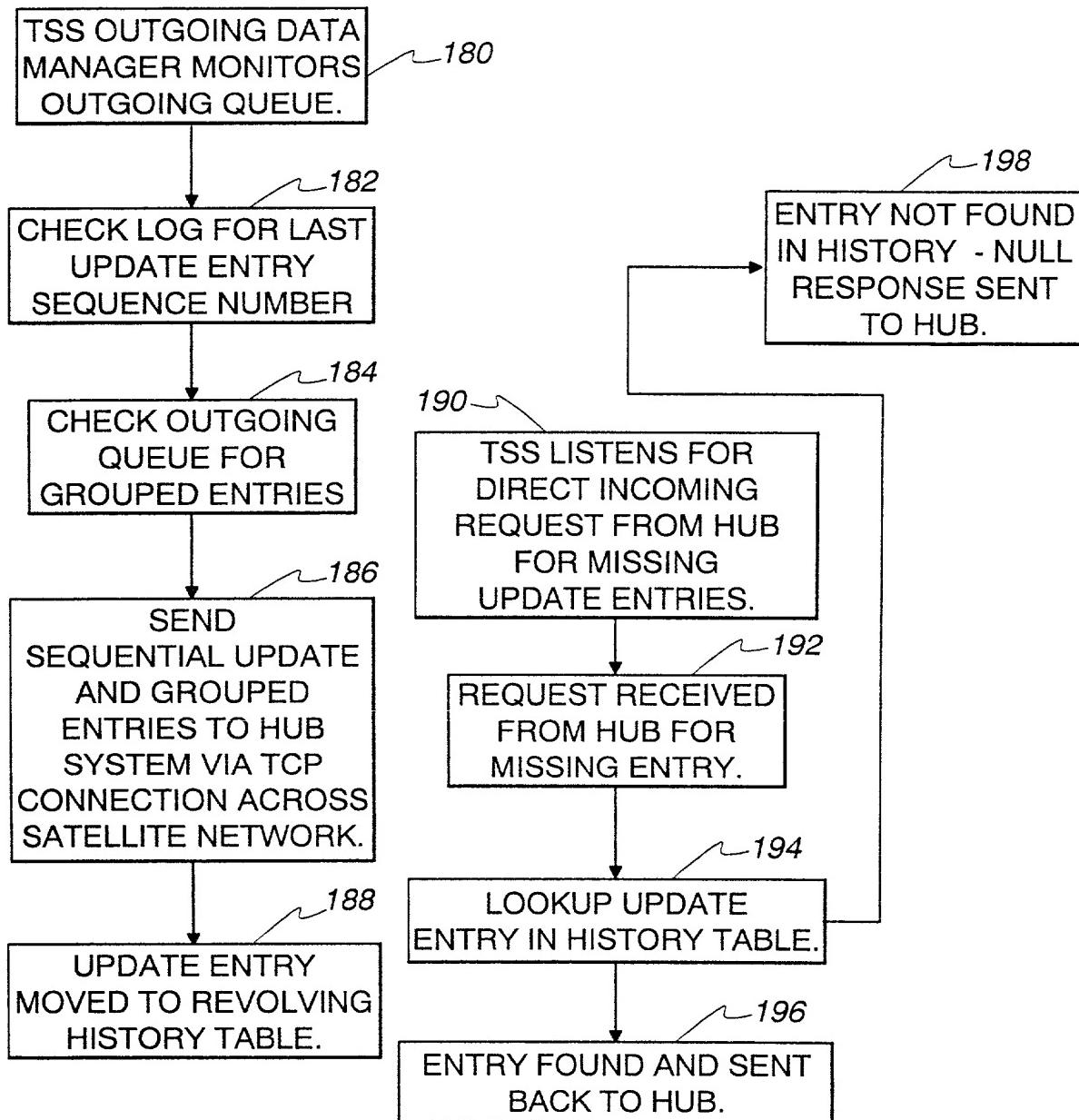


Fig. 13

## TSS OUTGOING DATA MANAGEMENT



*Fig. 14A* 14/15

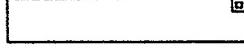
Electronic Freight Bills		Bill of Lading Menu	
<b>Welcome!</b> Store your shipping documents and capture all required signatures using this application		Load Number: 1111 Origin Originators Inc Destination Destinations Inc  Info Signature • Shipper <input checked="" type="checkbox"/> <input type="checkbox"/> • Consignee <input checked="" type="checkbox"/> <input type="checkbox"/> • Carrier(s) <input type="checkbox"/> <input type="checkbox"/> • B/L Data <input checked="" type="checkbox"/> <input type="checkbox"/>  <input type="button" value="Delete"/> <input type="button" value="Notes"/> <input type="button" value="Main Menu"/>	
<b>Shipper Info</b>		<b>Shipper Info</b>	
Load Number: 1111 Name Originators Inc Address 1111NW 12th St City Blahville State ▼ BL Zip 99558 Phone 99558		Load Number: 1111 Name Originators Inc Address 1111NW 12th St City Blahville State ▼ BL Zip 99558  <input type="text" value="Signature"/> <input type="button" value="Cancel"/> <input type="button" value="OK"/>	
Directions The directions are too vague on this freight bill. Had to call shipper to get.			
<input type="button" value="Sign"/> <input type="button" value="Cancel"/> <input type="button" value="Done"/>			
<b>Consignee Info</b>		<b>Consignee Info</b>	
Load Number: 1111 Name Destinations Inc Address 1515SW 11th Ave City Borderville State ▼ BV Zip 115 Phone 111-111-1111		Load Number: 1111 Name Destinations Inc Address 1515SW 11th Ave City Borderville State ▼ BV Zip 115  <input type="text" value="Signature"/> <input type="button" value="Cancel"/> <input type="button" value="OK"/>	
Directions No directions because it's very easy to find.			
<input type="button" value="Sign"/> <input type="button" value="OSD"/> <input type="button" value="Stop Off"/> <input type="button" value="Cancel"/> <input type="button" value="Done"/>			
<b>OSD Notes</b>		<b>Carrier Info (1 of 1)</b>	
----- ----- ----- ----- ----- ----- ----- -----  <input type="button" value="Cancel"/> <input type="button" value="Done"/>		Load Number: 1111 Name Trucking Company, Inc. Tractor No 115 Trailer No 116 Trans Loc _____  <input type="button" value="Add"/> -----  <input type="button" value="Add"/> <input type="button" value="Cancel"/> <input type="button" value="Done"/>	
<b>Carrier Info (1 of 1)</b>		<b>Bill of Lading Info</b>	
Load Number: 1111 Name Trucking Company, Inc. Tractor No 115 Trailer No 112 Trans Loc _____  <input type="text" value="Signature"/>  <input type="button" value="Cancel"/> <input type="button" value="OK"/>		Load Number: 1111 Bill Number 2222 Shipping Date 7/20/00 Payment ▼ Collect C O D Amount 0.00 C O D Fees 0.00 Charges Adv 0.00 Declared Value 1000.85  <input type="button" value="Items"/> <input type="button" value="Cancel"/> <input type="button" value="Done"/>	

*Fig. 14B*

<b>Bill of Lading Info</b>	<b>Bol Notes</b>
Load Number: 1111	----- ----- ----- ----- ----- ----- ----- ----- ----- -----
Qty Description      Lbs HM	
100 A lot of stuff	500 S
100 A lot of stuff	500 S

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*Fig. 15*

<b>Driver Application</b> <b>Welcome!</b> Please fill out as much of the following information as possible. You will need to have your driver's license, safety record, and employment history available  <input type="button" value="Cancel"/> <input type="button" value="New Drive App"/>		<b>List</b> Name On Application John Andrews  <input type="button" value="Delete"/> <input type="button" value="Delete"/> <input type="button" value="Delete"/>
<b>Personal Information</b> Name _____ Address _____ City _____ State <b>▼</b> Zip _____ Phone _____ E-mail _____ SSAN _____ <input type="button" value="Cancel"/> <input type="button" value="Continue"/>	<b>Driver's License Information</b> License No. _____ License St. <b>▼</b> _____ Expiration _____ Birthdate _____ Current CDL class? <input type="checkbox"/> A <input type="checkbox"/> A <input type="checkbox"/> A HazMat endorsed? <input type="checkbox"/> Yes Double or triple endorsed? <input type="checkbox"/> Yes Tank trailer endorsed? <input type="checkbox"/> Yes <input type="button" value="Back"/> <input type="button" value="Continue"/>	
<b>Safety Record</b> <input type="checkbox"/> Any accidents in last 3 years? <input type="checkbox"/> Any tickets in last 3 years? <input type="checkbox"/> DUI/DWI in last 7 years? <input type="checkbox"/> Ever convicted of a felony? <input type="checkbox"/> Had license suspended/revoked?  <input type="button" value="Back"/> <input type="button" value="Continue"/>	<b>Types of Training</b> <input type="checkbox"/> Refuse Operations <input type="checkbox"/> QualComm Operations <input type="checkbox"/> Highway Master Operations <input type="checkbox"/> Flatbed Rigging <input type="checkbox"/> Car Hauling <input type="checkbox"/> Household Movers <input type="checkbox"/> Tanker Operations <input type="checkbox"/> Electronics/Computer Transport <input type="button" value="Back"/> <input type="button" value="Continue"/>	
<b>Current Employer</b> Company _____ Address _____ City _____ State <b>▼</b> Zip _____ Phone _____ E-mail _____ <input type="button" value="Cancel"/> <input type="button" value="Continue"/>	<b>Current Employer</b> Type of Work: _____ _____ _____ _____ Start Date _____ End Date _____ <input type="button" value="Back"/> <input type="button" value="Continue"/>	
<b>Disclaimer</b> I certify that I personally completed this application and that all of the information is true and correct. I hereby request and authorize any company that receives this application to cause to _____  Applicants Signature  <input type="checkbox"/> <input type="button" value="I Disagree"/> <input type="button" value="I Agree"/>		